POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	
FORMALITY REVIEW		069254	9-29

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral) Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date						Claim		Date						Claim		Date					
Final	Original							Final	Original							Final	Original						
	1								51								110						
	2								52								112						
	3								53								113						
	4								54								114						
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	47								97								147						
	48								98								148						
	49								99								149						
	50								100								150						

If more than 150 claims or 10 actions
staple additional sheet here

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